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Docket No: 1059-007



**APPLICATION FOR UNITED STATES LETTERS PATENT
DECLARATION, POWER OF ATTORNEY, AND PETITION**

As a below-named inventor, I declare that:

My residence, post office address and citizenship are as stated next to my name; I believe that I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural inventors are named below) of the invention which is described and which is claimed in the specification, entitled: METHOD OF PREVENTING AND TREATING MUCOSAL AND DERMAL CONDITIONS.

The specification [] is attached hereto [X] was filed on January 4, 1999, as Application Serial No. 09/224,781.

I hereby state that I have reviewed and understand the contents of said specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the patentability of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed.¹

COUNTRY	APPLICATION NUMBER	DATE (Day, Month, Year)	PRIORITY CLAIMED UNDER 35 U.S.C. 119	
			Yes []	No []
			Yes []	No []
			Yes []	No []

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

¹In Non-Convention cases, a listing of all filings and current status of cases filed more than a year before the U.S. filing is required to comply with 37 CFR 1.56(a). Such a listing may be attached.

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APPLICATION SERIAL NO.	FILING DATE	STATUS

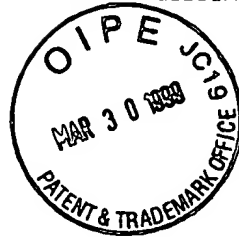
I hereby appoint my attorneys with full power of substitution and revocation, to prosecute this application and to transact all business in the U.S. Patent & Trademark Office connected therewith:

Edward A. Hedman, Reg. No. 22,120; Thomas M. Gibson, Reg. No. 24,638;
 James V. Costigan, Reg. No. 25,669; Kenneth F. Florek, Reg. No. 33,173;
 Alan B. Clement, Reg. No. 34,563; Martin P. Endres, Reg. No. 35,498 and
 Timothy X. Gibson, Reg. No. 40,618.

CORRESPONDENCE AND CALLS TO: James V. Costigan, Esq.
 HEDMAN, GIBSON & COSTIGAN, P.C.
 1185 Avenue of the Americas
 New York, NY 10036-2601
 Telephone: (212) 302-8989

The undersigned declares further that all statements made herein of his own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

INVENTOR(S)	DATE	RESIDENCE AND P.O. ADDRESS
Name: Barry M. Libin Signature: 	Date: 2/25/99 2/25/99 Citizen of: USA	15 Thornhedge Road Bellport, NY 11713
Name: Signature:	Date: Citizen of:	
Name: Signature:	Date: Citizen of:	
Name: Signature:	Date: Citizen of:	



SMALL BUSINESS

Docket No.: 1059-007Applicant(s) or Patentee(s): Barry M. LibinSerial or Patent No.: 09/224,781Examiner: ---Filed or Issued: January 4, 1999Art Unit: ---For: METHOD OF PREVENTING AND TREATING MUCOSAL AND DERMAL CONDITIONS

VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY STATUS
(37 CFR § 1.9(F) AND § 1.27(C)) - SMALL BUSINESS CONCERN

I hereby declare that I am:

- ☐ the owner of the small business concern identified below:
☒ an official of the small business concern empowered to act
on behalf of the concern identified below:

NAME OF CONCERN: I-DENT INTERNATIONAL CORPORATIONADDRESS: 16-3 Station Road
Bellport, NY 11713

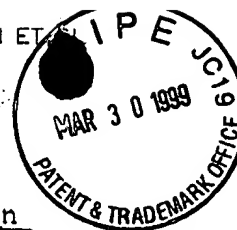
I hereby declare that the above-identified small business qualifies as a small business concern as defined in 13 CFR §121.3-18, and reproduced in 37 CFR §1.9(d), for purposes of paying reduced fees under section 41(a) and (b) of Title 35, United States Code, in that the number of employees of the concern, including those of its affiliates, DOES NOT EXCEED 500 PERSONS. For purposes of this statement, (1) the number of employees of the business concern is the average over the previous fiscal year of the concern of the persons employed on a full-time, part-time or temporary basis during each of the pay periods of the fiscal year, and (2) concerns are affiliates of each other when either, directly or indirectly, one concern controls or has the power to control the other, or a third party or parties controls or has the power to control both.

I hereby declare that rights under contract or law have been conveyed to and remain with the small business concern identified above with regard to the invention, entitled METHOD OF PREVENTING AND TREATING MUCOSAL AND DERMAL CONDITIONS,

by inventor(s): Barry M. Libin

described in:

- ☐ the specification filed herewith
☒ application serial no. 09/224,781, filed January 4, 1999
☐ patent no. _____, issued _____.



Applicant(s) or Patentee(s): Barry M. Libin

VERIFIED STATEMENT OF SMALL BUSINESS (CONTINUED)

If the rights held by the above-identified small business concern are not exclusive, each individual, concern or organization having rights to the invention is listed below and no rights to the invention are held by any person, other than the inventor, who could not qualify as a small business concern under 37 CFR \$1.9(d) or by any concern which would not qualify as a small business concern under 37 CFR \$1.9(d) or a nonprofit organization under 37 CFR \$1.9(e).

NAME: _____

ADDRESS: _____

- ☐ INDIVIDUAL
- ☐ SMALL BUSINESS CONCERN
- ☐ NONPROFIT ORGANIZATION
- ☐ See attached sheet for additional person(s), concern(s), or organization(s).

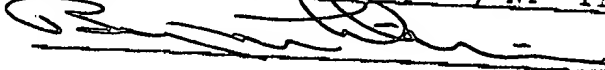
I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate (37 CFR \$1.28(b)).

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

NAME OF PERSON SIGNING: Barry M. Libin TITLE: President

ADDRESS: I-DENT INTERNATIONAL CORPORATION

16-3 Station Road, Bellport, NY 11713

SIGNATURE:  DATE: 2/25/99

*NOTE: SEPARATE VERIFIED STATEMENTS ARE REQUIRED FROM EACH NAMED PERSON, CONCERN OR ORGANIZATION HAVING RIGHTS TO THE INVENTION AVERRING TO THEIR STATUS AS SMALL ENTITIES (37 CFR \$1.27)